

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00488742 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name of Payee Terris Barnes & Walters		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2016 </div>	
Mailing Address 400 Montgomery St Ste 900		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 528568.00 </div>	
City State Zip Code San Francisco CA 94104-1223	Transaction ID : E4BFF7D52E0C44142A58 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		
Purpose of Expenditure Direct Mail Costs	Category/ Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Josh Gottheimer	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 05 State: NJ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 730083.00 </div>		<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 528568.00 </div>	

Full Name of Payee Public Opinion Strategies, LLC		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2016 </div>	
Mailing Address 214 N Fayette St		Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 31000.00 </div>	
City State Zip Code Alexandria VA 22314-2433	Transaction ID : E2BE9E61AA2654BBF8F1 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		
Purpose of Expenditure Polling expenses	Category/ Type	Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Rep. Mike Coffman	
Calendar Year-To-Date Per Election for Office Sought		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 06 State: CO Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 453025.00 </div>		<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 31000.00 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 559568.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;"> 559568.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael McGrew

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ C C00488742	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 21 / 2016	
Mailing Address 430 N Michigan Ave		Amount 525.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : EA72A97ED5F2E4EC98E1
Purpose of Expenditure Consulting Services		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rep. Mike Coffman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		453025.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Strategic Partners & Media, Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 21 / 2016	
Mailing Address PO Box 480		Amount 421500.00	
City Arnold	State MD	Zip Code 21012-0480	Transaction ID : E95FA6D5FCB014CAEA1
Purpose of Expenditure TV Ad buy & production costs		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rep. Mike Coffman		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		453025.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	422025.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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NAME OF COMMITTEE (In Full) National Association of Realtors Congressional Fund		FEC IDENTIFICATION NUMBER ▼ C C00488742
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 21 / 2016
Mailing Address 430 N Michigan Ave		Amount 1050.00
City Chicago	State IL	Zip Code 60611-4011
Purpose of Expenditure Consulting Services	Category/Type	Transaction ID : E7B285241E11E46E0930 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Josh Gottheimer	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought 730083.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Peter D Hart Research Associates Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2016
Mailing Address 1724 Connecticut Ave NW		Amount 30400.00
City Washington	State DC	Zip Code 20009-1103
Purpose of Expenditure Polling expenses	Category/Type	Transaction ID : E9391FB80B2C44C6AB93 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rep. Rick M. Nolan	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought 313165.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	31450.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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*Michael McGrew**[Electronically Filed]*

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Terris Barnes & Walters		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2016	
Mailing Address 400 Montgomery St Ste 900		Amount 281715.00	
City San Francisco	State CA	Zip Code 94104-1223	Transaction ID : EB037046AA3EC46FB859 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Direct Mail Costs	Category/ Type		
Name of Federal Candidate Rep. Rick M. Nolan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought		313165.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee National Association of REALTORS		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2016	
Mailing Address 430 N Michigan Ave		Amount 1050.00	
City Chicago	State IL	Zip Code 60611-4011	Transaction ID : E39E72722B54643618AD Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Consulting Services	Category/ Type		
Name of Federal Candidate Rep. Rick M. Nolan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought		313165.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	282765.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1295808.00

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Michael McGrew

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